ITD 2730 (Rev. 10-03)

Application for Temporary Employment



Idaho Transportation Department

Please Print					Date Submitted			
Last Name First		Middle		SSN		Phone		
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Street Address		City			State	Zip Code		
on out / tadi out		O.K.y				p		
I certify that I am a U.S. citizen, permanent resident, or a Foreign National with authorization to work in the United States.								
I certify that I am in compliance with the provisions of the Selective Service Act (50 U.S.C. Appendix, War and National Defense Sections 451-473) and Idaho Code (Section 46-501 et seq.).								
Have you ever been convicted of, or entered a plea of guilty, no contest, or had a withheld judgment to a felony? (This question must be answered in order to be considered for employment with the State of Idaho.)								
If Yes, please explain.								
Have you worked for the state before? No Yes (If yes, complete the following information.)								
Location	Su	Supervisor			Date(s)			
You may apply in one or monogualified and interested in provided below for Other. Professional A1 Engineering A2 Research A3 Accounting Information Services IT System Operator Office/Clerical C1 Secretarial C2 Data Entry C3 Clerical C4 Acct. Tech. Other (Please Specify)	applying. If the	hnical Of Drafting Of Surveyir Of Enginee Of Mainten	for which you are applying ring Aide ance Aide ow Operation nt Management Crewon		Skilled Craft E1 Carpe E2 Electr E3 Mech E4 Body E5 Weldi	e job title on the line ts entry ical anical /Fender ng ntenance Building Maintenance		
Because a driver's license i license was issued. Driver's License Number If a position you apply for rehave and mark any of the e Type of License CDL Class A* CDL *If you are applying for a job the Program information sheet.	equires a driver's ndorsements that	s license, you at are shown	our driving record will be non the license. C* Driver's License.	State of e checke se D	Issueed. Please mark	the type of license	you	
Please list all restrictions shown on your license.								

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Education (Advanced education or special training received after high school) School Location From Graduated Type of Degree or Diploma ☐ Yes ☐ No ☐ Yes □No Special Qualifications, Skills, Languages, Certifications Prof. License State or Other Licensing Authority Year of First Year Current License/Certification License/Certification Expires **Experience** (Attach Extra Sheets, If Necessary) Employer's Name, City and State May we contact employer? From То (Mo/Yr) (Mo/Yr) ☐ No ☐ Yes Phone No. Supervisor's Name Hours/Week Job Title and Description Reason for Leaving Employer's Name, City and State May we contact employer? То From (Mo/Yr) (Mo/Yr) ☐ Yes ☐ No Phone No. Supervisor's Name Hours/Week Job Title and Description Reason for Leaving Shift Work? Will you accept: Night Work? Temporary Work?* Part-Time Work?** Date available to begin work ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No *Not to exceed 1,385 hrs. in any 12-month period. **Less than 8 hrs. per day or 40 hrs. per week. Please mark only those areas in which you would accept employment. Headquarters District 3 District 5 X Boise ☐ American Falls – Aberdeen ☐ Boise – Meridian ☐ McCall – Cascade – New Meadows ☐ Blackfoot **District 1** ☐ Mountain Home – Glenns Ferry ☐ Montpelier – Soda Springs ☐ Bonners Ferry ☐ Bruneau – Grand View ☐ Pocatello ☐ Coeur d'Alene – Spirit Lake – Harrison □ Nampa – Caldwell ☐ Preston ☐ Kellogg – Wallace – Osburn – Mullan ☐ Payette – Weiser – New Plymouth ☐ St. Maries – Santa – Plummer ☐ Sandpoint – Priest Lake – Clark Fork District 6 District 2 District 4 ☐ Arco - Mackay ☐ Grangeville – Reed's Bar – Lucile ☐ Idaho Falls ☐ Burley – Rupert ☐ Lewiston – Boville – Kendrick ☐ Gooding – Shoshone – Bliss ☐ Rexburg – Rigby ☐ Moscow – Potlatch – Deary ☐ Hailey – Ketchum – Stanley ☐ St. Anthony – Ashton ☐ Orofino – Weippe ☐ Jerome – Wendell ☐ Island Park Area ☐ Fleming – Powell ☐ Twin Falls – Buhl ☐ Salmon ☐ Craigmont – Kooskia ☐ Challis – Stanley Signature Date